

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: HEALTH CARE FINANCING ADMINISTRATION	1. TRANSMITTAL NUMBER: 10 -- 005	2. STATE: MAINE
	3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR CENTER FOR MEDICARE AND MEDICAID SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE(S) APRIL 1, 2010	

5. TYPE OF PLAN MATERIAL (CHECK ONE):


- NEW STATE PLAN AMENDMENT TO BE CONSIDERED AS NEW PLAN AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)

6. FEDERAL STATUTE/REGULATION CITATION: 1902(a)(10)(E)(i)-(iv); 1905(p)(3); 1902(A)(10)(E)(Y, V), (U), (W) / ; 1860D-14(a)(3)(D)	7. FEDERAL BUDGET IMPACT: a. FFY 2010 \$ 0 b. FFY 2011 \$ 0
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: ATTACHMENT 2.2-A PAGE 9A, 9B, 9C; ATTACHMENT 2.6-A PAGE 22, 22A; Attachment 2.2-A, pages 9b, 9b1	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable): REPLACES PAGES OF SAME NUMBER
10. SUBJECT OF AMENDMENT: MIPPA - NEW RESOURCE STANDARDS FOR QMB, SLMB AND QI	

11. GOVERNOR'S REVIEW (Check One):


- GOVERNOR'S OFFICE REPORTED NO COMMENT OTHER, AS SPECIFIED
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED COMMISSIONER, DEPT. OF HEALTH AND HUMAN SERVICES
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

12. SIGNATURE OF STATE AGENCY OFFICIAL: 	16. RETURN TO: TONY MARPLE, DIRECTOR Office of MaineCare Services #11 State House Station 442 Civic Center Drive Augusta, ME 04333-0011
13. TYPED NAME: BRENDA M. HARVEY	
14. TITLE: COMMISSIONER, DEPARTMENT OF HEALTH AND HUMAN SERVICES	
15. DATE SUBMITTED: April 12, 2010	

FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED: April 12, 2010	18. DATE APPROVED: July 9, 2010
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PLAN APPROVED - ONE COPY ATTACHED

19. EFFECTIVE DATE OF APPROVED MATERIAL: April 1, 2010	20. SIGNATURE OF REGIONAL OFFICIAL:  /s/
21. TYPED NAME: Richard R. McGreal	22. TITLE Associate Regional Administrator, Division of Medicaid and Children's Health Operations

23. REMARKS

As agreed to by State officials, boxes 6 and 8 were revised to reflect the correct Federal statute/regulation citations and page numbers of the plan section or attachment, respectively.